

	M 102: Campaign Finance Report Municipal Form Mice of Campaign and Political Finance	rt

	Page 1 of 6
Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance	13 JAN 32 PH
with: y or Town Clerk or Election Commission Please print or type all information, except signatures.	13 0
Fill in dates: Month Date Period Beginning 12 5 2012 Ending 12	Date Year 3/ 20/2
Type of report: (Check one) □8th day preceding preliminary □8th day preceding election □30 day after election ye	ear-end report dissolution
Full Name of Candidate (If applicable) Full Name of Candidate (If applicable) Committee Name of Committee Tony Anching Name of Committee Tony Residential Address Committee Mailing	ISCI Treasurer DRACUT MA
Tel. No. (optional)	Tel. No. (optional)
Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 14) Line 5: Ending balance (line 3 minus line 4) \$	049.81 230.00 279.81 748.75 531.06 466.00
Hemorer a sillumination may)	or this reporting period and represents the ements of M.G.L. c. 55.
FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BI Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with independent activity filing separate report I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for	and complete statement of all campaign of M.G.L. c. 55. I have not received any and complete statement of all campaign this reporting period and represents the
1/1/4/ 1/4/	7-31-12

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only liemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

Date Received	Name and Residential Address (alphabetical listing required)		unt	Occupation & Employer (for contributions of \$200 or more)
	SEE AHATCHED	SH	EE	7
•	•			
	¥			
				New Boston How to
			-	
				W
-+		•		
	19			
	and the state of t			200
Line 9: To	otal receipts in excess of \$50 (or listed above)	100	œ	
Line 10: To	otal receipts \$50 and under* (not listed above)	130	00	
Line 11: T(OTAL RECEIPTS IN THE PERIOD	230	1	Enter on page 1, line 2

[•] If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

Page 2

Friends of GLTHS Donations

Amount			Name & Address	Date Received
\$100.00	Lowell, MA 01850	24 Munroe Street	CTE Tom Golden	12/22/2012
\$100.00				

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	(alphabetical listing)		Purpose of Expenditure	Amo	unt
	SEE 1	ATTATCHE	\supset		
•					
					*
	And the second s				
	11011011011				
ŀ		Line 12:	Expenditures over \$50	2219	50
			Expenditures \$50 and under*		25
ī	Enter on page 1, line 4		:TOTAL EXPENDITURES		75

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 3

106	12/5/12 Dracut Historical Society	100.00
107	12/6/12 Campaigns that Win	1,094.50
108	12/6/12 Carbon Colors - DF cards and mailing	225.00
109	12/7/12 Lowell Sun	1,200.00
110	12/18/12 Carbon Colors - TY cards	29.25
111	12/22/12 MJ Ross Group Inc.	100.00
		2,748.75

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date	From Whom Received*	Residential Address	Description of	Value
Received		· · · · · · · · · · · · · · · · · · ·	Contribution	
12/12/12	WEBSTER PRINTING CO. INC.	1069 W. WASHINGTON ST. HANSON, MA-00341	FREE LAWN SIENS (AND METAL STAKES	44100
14/12	RICHARD COWAN		TOWN MEETING VERER LIST	1500
				·
		Line 15:	In-kind over \$50	441.00
		Line 16:	In-kind \$50 and under	1500
	Enter on page 1, line 6	Line 17:	Total In-kind	456 CO

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address Purpose	Amount
F	Enter on page 1, line 7	Line 18: OUTSTANDING LIABILITIES (ALL)	-0-



Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

3	A	245
- 23	<u></u>	
CITY OF	11111111	
	-	
Eon.		75.75
mg (T)		COLLA
F	9	1
3	(L)	
0.8	$\overline{}$	

with: or Town Clerk or Election Commission Please print or t	Please print or type all information, except signatures. dates: Mooth Due Yese Ending Ending Mooth Due Yese Ending Full Name of Check one) Say preceding preliminary Office Sought and District Residential Address Tel. No. (optional) SUMMARY BALANCE INFORMATION: Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 14) Line 5: Ending balance (line 3 minus line 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used ENTERPORA Summittee Treasurer Tel. No. (optional) Summary BALANCE INFORMATION: Line 5: Ending balance Line 6: Total in-kind contributions this period (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used ENTERPORT Summittee Treasurer: That I have examinding all contributions, learn, receipts, expensitures, disbursements, in-kind contributions and liabilities for this reporting period and represents the parallels of perfaury: Signed under the penalties of perfaury: Date					
Fill in dates: Month Date Reporting Period Beginning /	13	NY 60 1000	Month	Date //	\\S	
Type of report: (Check one) ☐8th day preceding preliminary ☐8th day preced	ling election	30 day after ele	ction 🗆	year-end rep	port 🗆 dissolu	tion
Full Name of Candidate (if applicable)				ıme ,	HS_	
Office Sought and District		Name of	Committee	Treasurer	TMA	
Residential Address		Commit	ttee Mailing	Address		
Tel No. (optic	onal)			Tel. N	Vo. (optional)	
Line 5: Ending balance (line Line 6: Total in-kind contrib Line 7: Total (all) outstanding	e 3 minus line 4 putions this p ng liabilities	period (page 4) (page 4)	\$_ <u>.</u> \$_ \$_ \$_	531.0	76 — —	
finance activity, including all contributions, loans, receipts, expendi campaign finance activity of all persons acting under the authority of	itures, disbursements or on behalf of this o	, in-kind contributions committee in accordance	and liabilities with the requ	for this reporti	ing period and represe G.L. c. 55.	mpaij ents t
FOR CANDIDATE FI	LINGS ONL	Y: (CANDIDATE	MUST SIGN	BELOW)		
Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of a certify that I have examined this report including attached schedu finance activity, of all persons acting under the authority or on bet contributions, incurred any liabilities nor made any expenditures or Candidate without Committee OR Candidate with independent of certify that I have examined this report including attached schedu finance activity, including contributions, loans, receipts, expenditure campaign finance activity of all persons acting under the authority	ules and it is, to the b half of this committe it my behalf during it ident activity filing a ules and it is, to the b tures, disbursements.	e in accordance with this reporting period. separate report best of my knowledge in-kind contributions :	and belief, a tr	is of M.O.L. c. ue and complet for this reportir	55. I have not receive te statement of all can ng period and represe	wed au

Signed under the penalties of perjury:

Candidate signature (in ink)

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only themize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
	None			
	8			
				5
	-1			
		•		
	8			
	W			
Line 9: T	Cotal receipts in excess of \$50 (or listed above)			
	Total receipts \$50 and under* (not listed above)			
	TOTAL RECEIPTS IN THE PERIOD	-0	-	Enter on page 1, line 2

[•] If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

Page 2

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	To Whom Paid Address Purpose of Expenditure (alphabetical listing)			e Amou	
	Amal (alphabetical listing)				
	7.10				
		- 2			
		A			
			-		
			212: Expenditures over \$50		
	Enter on page 1, line 4		e 13: Expenditures \$50 and under* e 14:TOTAL EXPENDITURES	-0	_

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 3

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	None			
*:				
				9
	I	Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	-0-

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address Purpose	Amount
	none		
		•	
12			
	Enter on page 1, line 7	Line 18: OUTSTANDING LIABILITIES (ALL)	-0-



Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts	File with: City or Town Clerk or Election Commissio
Fill in Reporting Period dates: Beginning Date: 01-01-	
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election 3	0 day after election year-end report dissolution
	FRIEIDS OF THE GLTHS
Candidate Full Name (if applicable)	Committee Name
15 7	TONY ARCHINSKI
Office Sought and District	Name of Committee Treasurer
100 I C	76 D St. DOALOT, MA
Residential Address	Committee Mailing Address
Telephone Number (optional):	ephone Number (optional):
SUMMARY BALANCE IN	NEODMATION.
SUMMARI BALANCE IN	(FORMATION:
Line 1: Ending Balance from previous report	-0-
Line 2: Total receipts this period (page 3, line 11)	4.222.00
Line 3: Subtotal (line 1 plus line 2)	4,222.00
Line 4: Total expenditures this period (page 5, line 14)	1,192,19
Line 5: Ending Balance (line 3 minus line 4)	3.049.81
Line 6: Total in-kind contributions this period (page 6)	0
Line 7: Total (all) outstanding liabilities (page 7)	
Line 8: Name of bank(s) used:	
Affidavit of Committee Treasurer: certify that I have examined this report including attached schedules and it is, to the best of my know, including all contributions, loans, receipts, expenditures, disbursement, in-kind contributions and it is, to the best of my know, including all contributions, loans, receipts, expenditures, disbursement, in-kind contributions are activity of all persons acting under the authority or on behalf of this committee in accordance of the penalties of perjury:	knowledge and belief, a true and complete statement of all campaign finance attentions and liabilities for this reporting period and represents the campaign ance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date:
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)	, ,
Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the best of activity, of all persons acting under the authority or on behalf of this committee in accordance incurred any liabilities nor made any expenditures on my behalf during this reporting period.	e with the requirements of M.G.L. c. 55. I have not received any contributions.
Candidate without Committee OR Candidate with independent activity filing separate of I certify that I have examined this report including attached schedules and it is, to the best of finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind campaign finance activity of all persons acting under the authority or on behalf of this commit	my knowledge and belief, a true and complete statement of all campaign d contributions and liabilities for this reporting period and represents the
igned under the parelties of parings.	Date: 12/11/12/

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	SEE AMATCH	ED	SHEET
	,		
=			
			Pi
ine 9: Total Receip	ts over \$50 (or listed above)	2,242.00	
ine 10: Total Receip	ots \$50 and under* (not listed above)	198000	
ine 11: TOTAL RI	ECEIPTS IN THE PERIOD	4222.00	← Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

FRIENDS OF THE GLTHS

ate Received	Name & Address			Amount	Occupation&Employer
11/30/2012	Anthony Gilardi	9802 Bristol Sq. Ln	Bethesda, MD 20814	\$100.00	
11/30/2012	Bond Electric	161 Surrey Lane	Dracut, MA 01826	\$100.00	
11/30/2012	Boutin Appraisal Inc	255 4th Ave	Lowell, MA 01854	\$100.00	
11/28/2012	Brox Industries	1471 Methuen St	Dracut, MA 01826	\$100.00	
12/3/2012	Cash	not deposited	petty cash	\$100.00	
11/15/2012	Dakota Systems	Broadway Rd	Dracut, MA 01826	\$500.00	Local Business donation
11/28/2012	Dracut Hardware	1982 Laveview Ave	Dracut, MA 01826	\$100.00	
11/28/2012	Erik Gitchier		Lowell, MA 01852	\$100.00	
11/30/2012	James Cassin	Fairmount Street	Lowell, MA	\$100.00	
12/3/2012	John M Sheehan	520 Forrest Street	Methuen, MA 01844	\$100.00	
11/30/2012	Marc Gosselin	103 Chapman St	Dracut, MA 01826	\$200.00	Police Officer
11/30/2012	Mary Jo Santoro	29 Chestnut Cir	Merrimack, NH 03054	\$200.00	Superintendant of GLTHS
11/30/2012	Michael Hayden	25 Hadley St	Lowell, MA 01851	\$100.00	
11/30/2012	Michael McGovern	124 Boylston St.	Lowell, MA 01852	\$100.00	
11/30/2012	Michael Zlotnik	86 Chelsea St	Gardner, MA 01440	\$100.00	
11/21/2012	Victor Olsen	80 Sue Ann Drive	Dracut, MA 01826	\$142.00	
				\$2,242.00	

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

port an expendi		nittee name and a page number on	each page.)	
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
	SEE A	HA tchel-		
	·			
-		Line 12: Total Expenditures over	er \$50 (or listed above)	1137.00
		Line 13: Total Expenditures \$50	and under* (not listed above)	34.47
	. •	Line 14: TOTAL EXPENDITU		1172.19

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 4

101	11/21/12	Carbon Colors -(posters fundraiser letter)	82.34
102	11/29/12	Carbon Colors -(DF cards invitations)	218.00
103	12/1/12	Anthony Archinski - reimbursement supplies	34.47
104	12/4/12	Lowell Sun	375.00
105	12/4/12	Carbon Colors - DF cards and mailing	\$462.38



Form CPF 101 BQ: STATEMENT OF ORGANIZATION BALLOT QUESTION COMMITTEE

450	
Commonwealth of	Office of Campaign and Political Finance 📃 👼 🚆
Massachusetts	
Office of Campaign and Political Finance	and the second s
One Ashburton Place	CPF ID #:
Boston, MA 02108	
(617) 727-8352	Please print or type all information, except signatures.
NOTICE IS HERERY GIVEN	in accordance with the provisions of M.G.L. Chapter 55, of the organization of
a ballot question committee as	
a banot question committee us	
1. Name:	FRIENDS OF THE
(See note 1)	GREATER LOWELL TECANICAL HIGH SCHOOL
2. Mailing Address:	76 D S4
	DAGUT, NA 01826
3. Purpose / Specific issues	TO PROMOTE A PAUDRABIE OUTCOME
and interests (See note 2)	ON BALLOT OUESTION
4. Topic of question:	DEBT EXClusion TO FUND SCHOOL RENOVATION PROSECT Question number, if known
5. Committee is formed to (c	check one): support / oppose the question.
6. Officers: Name Chairman: Rene Di	Residential Address City/State/ZIP Tel. No. ON J. 52 Concord Rd Dracur M 01826 978 937 5073
Treasurer: Tonu Av	CHANSE 76 DSA DOALUTMA-01826 978957-620
Other Officer:	

The chairman and treasurer of a political committee should be aware that provisions of M.G.L. c. 55 specify that each treasurer of a political committee shall keep and preserve detailed accounts, vouchers and receipts for a period of six years from the date of the relevant election. Chapter 55 also specifies that no expenditures shall be made for, or on behalf of, a political committee without the authorization of the chairman or treasurer, or their designated agents; and, that all the funds of a political committee shall be kept separate from any personal funds of any officers, members or associates of such committee.

Attach additional page, if necessary, with other officers and finance committee, if any.

SIGNED UNDER THE PENALTIES OF PERJURY:

I hereby accept the office of Chairman of the above-named committee:	
Show I was a second of the sec	11/12/12
Chairman's Signature	Date

I hereby accept the office of treasurer of the above-named committee. I understand that I am subject to certain duties and liabilities under M.G.L. c. 55, including the timely filing of campaign finance reports. I am aware that an appointed public employee may not serve as treasurer of a ballot question committee.

Treasurer's signature 11/12/12